

RECEIVED
CENTRAL FAX CENTER

001/015

JUL 13 2006

Atty Docket No. 015114-064700US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Walter, Craig E.

Group Art Unit 2188

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Walter, Craig E.

CERTIFICATION OF FACSIMILE TRANSMISSION

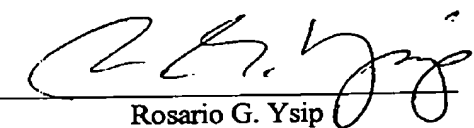
I hereby certify that the following documents in re Application of Amanda Noe, Application No. 10/695,976, filed October 28, 2003 for PATTERN DETECT AND BYTE ALIGN CIRCUIT USING CAM are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form, PTO/SB/21 (1 page);
2. Amendment (11 pages); and
3. Extension of Time Request, PTO/SB/22 (1 page, in duplicate).

Number of pages being transmitted, including this page: -15-

Dated: July 13, 2006


Rosario G. Ysip

***PLEASE CONFIRM RECEIPT OF THIS PAPER BY
RETURN FACSIMILE AT (415) 576-0300***

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Telephone: 415-576-0200
Fax: 415-576-0300
3891

60820674 v1

RECEIVED
CENTRAL FAX CENTER

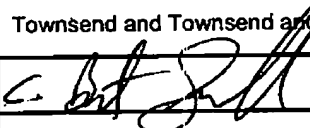
002/015

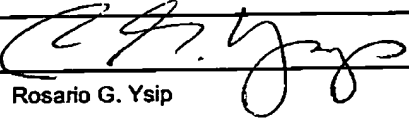
JUL 13 2006

PTO/SB/21 (08-04)

| | | | |
|--|----------------------|------------------------|-----------------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 10/695,976 | |
| | Filing Date | October 28, 2003 | |
| | First Named Inventor | Noe, Amanda | |
| | Art Unit | 2188 | |
| | Examiner Name | Walter, Craig E. | |
| Total Number of Pages In This Submission | -14- | Attorney Docket Number | 015114-064700US |

| ENCLOSURES (Check all that apply) | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | Townsend and Townsend and Crew LLP | | |
| Signature |  | | |
| Printed name | C. Bart Sullivan | | |
| Date | July 13, 2006 | Reg. No. | 41,516 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|---|------|---------------|
| I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on July 13, 2006. | | | |
| Signature |  | | |
| Typed or printed name | Rosario G. Ysip | Date | July 13, 2006 |

60820668 v1